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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

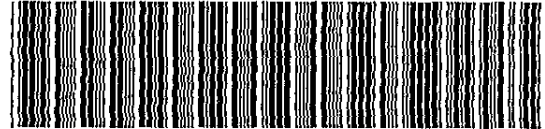
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Stephenc Hardy GAVE  
AUTHORIZATION BY PHONE TO  
CORRECT #1  
DATE 5-25-05  
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05 MAY 23 PM 3:50  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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5/25/05  
mst

## TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: TONNEAU Lift LLC  
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Stephen C. Hardy  
(Name of Person)

TONNEAU Lift LLC  
(Firm/Company)

22019 US Hwy. 19 N.  
(Address)

Clearwater FL 38765  
(City/State and Zip Code)

For further information concerning this matter, please call:

Stephen C. Hardy at (727) 796-3140  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |  |   |   |  |
|--|---|---|--|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input checked="" type="checkbox"/> \$160.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|--|---|---|--|

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

05 MAY 23 PM 3:50

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

TONNEAU Lift LLC

**ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

**Principal Office Address:**

**Mailing Address:**

22019 US Hwy. 19 N.  
Clearwater FL 33745

22019 US Hwy. 19 N.  
Clearwater FL 33745

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

The name and the Florida street address of the registered agent are:

Stephen C. Hardy  
Name

3422 Springfield Dr.  
Florida street address (P.O. Box **NOT** acceptable)

Holiday FL 34691  
City, State, and Zip

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

05 MAY 23 PM 3:50

FILED

*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..*

Stephen C. Hardy  
Registered Agent's Signature

(CONTINUED)

**ARTICLE IV- Manager(s) or Managing Member(s):**

The name and address of each Manager or Managing Member is as follows:

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGR

Stephen C. Hardy  
3422 Springfield DR  
Holiday FL 34691

MGRM

Richard Mahoney  
10325 123rd AVE.  
Largo FL 33773

MGRM

Christopher Kerns  
739 6th St. S.  
Safety Harbor, FL 34695

(Use attachment if necessary)

**NOTE: An additional article must be added if an effective date is requested.**

**REQUIRED SIGNATURE:**

  
Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Stephen C. Hardy  
Typed or printed name of signee

**Filing Fees:**

\$125.00 Filing Fee for Articles of Organization and Designation  
of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)